Area Code & Telephone Number (if different from above)

Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.lowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB			
Gift or Bequest information received by a department or accepted by the Governor on behalf of the state			
For office use only Indexed			
Audited			
Checked			
Computer			

DEPARTMENT OF	OFFICE	RECEIVING	THE GIF	T OR	BEQUEST
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STATE TRAINING SCHOOL		1
Name of Department or Office 3211 EDGINGTON AVENUE	ELDORA, IA 50627	- Commercial Control of the Control
Malling Address 611-358-5402	City, State, Zip Code	north eagle
Area Code & Telephone No.		
CONTACT PERSON FOR RECIPIENT DEPARTM	IENT OR OFFICE:	Çrii:}
Kristin Hagedon		
Name same		
Mailing Address (if different from above)	City, State, Zip (if different from	above)
khaoedo@dhs state.ia us	same	

DONOR OF GIFT OR BEQUEST:

Email Address

American Legion Auxilia	ry Unit #681, c/o Susan Sams		
Name PO Box 217	Whitten, IA 50269		-
Mailing Address	Cily, State, Zip Code	10/8/18	\$50.00
Area Code & Telephone Nu	mber	Pate of Gift or Bequest *value is defined as "fair mar receiving department or offic	Amount/Value* ket value" of item as determined by e. If no value mark "0.00".
Email Address (optional)			
Provide a description of the	gift or bequest and purpose thereof:		
	1 10 7 1/1 1/1 6	a t	

monetary donation to be used for Religious and/or Christmas activities for students

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

l. Kristin Hagedon	_affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and
	value (if applicable) is correct and true to the best of my knowledge.

Kristin	Lagedon)	10/8/18
Signature	8	Date